Application or Docket Number

| Effective October 1, 2003   |  |   |               |                                       |              |                  |                   |   |                         |                     |                     |                        |
|---|--|---|---------------|---------------------------------------|--------------|------------------|-------------------|---|-------------------------|---------------------|---------------------|------------------------|
| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |   |               |                                       |              |                  |                   |   | ENTITY                  |                     |                     | R THAN                 |
| 1   | TOTAL CLAIM                                    | IS  |               |                                       |              | <u> </u>         |                   | RATE  | FEE                     | _ر<br>آ             | RATE                | FEE                    |
| F   | OR   | NUMBE                                     | R FILED       | NUN                                   | NUMBER EXTRA |                  | BASIC FI          |   | ٦,                      | BASIC FE            |                     |                        |
| 7   | OTAL CHARGE                                    | EABLE CLAIMS                              | 14/ "         | / minus 20=                           |              | *                |                   | \ \cdot \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | <del></del>             | 7                   |                     | <del></del>            |
| 1/  | DEPENDENT                                      | CLAIMS .                                  | -             | minus 3 =                             |              |                  |                   | XS 9=   |                         | OF                  | XS18=               | <u> </u>               |
| ii—   |  | ENDENT CLAIM I                            | _ <u></u>     | 1111103 3 =                           |              |                  | 1                 | X43=  |                         | OF                  | X86=                |                        |
| <u> </u>  |  |   | •             |                                       |              |                  | }                 | +145=   |                         | OF                  | -290=               |                        |
| •.1   | f the difference                               | e in column 1 is                          | s less than a | less than zero, enter "0" in column 2 |              |                  |                   | TOTAL   |                         | OF                  | TOTAL               |                        |
| CLAIMS AS AMENDED - PART II   |  |   |               |                                       |              |                  |                   |   |                         |                     |                     | R THAN                 |
|   | 1  |   |               | (Colum                                |              | (Column 3)       | 1 -               | SMALL   | ENTITY                  | OR                  | SMALL               | ENTITY                 |
| AMENDMENT A   |  | REMAINING<br>AFTER<br>AMENDMENT           |               | NUMB<br>PREVIO<br>PAID F              | ER<br>USLY   | PRESENT<br>EXTRA |                   | RATE  | ADDI-<br>TIONAL<br>FEE  |                     | RATE                | ADDI-<br>TIONA<br>FEE  |
| Ş   | Total  | *   | Minus         | **                                    |              | =                |                   | XS 9=   |                         | OR                  | . XS18=             |                        |
| AME.  | Independent                                    |   | Minus         | ***                                   |              | =                |                   | X43=  |                         | 1                   | X86=                |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |               |                                       |              |                  |                   |   | -                       | OR                  |                     | 1.                     |
|   |  |   |               |                                       |              |                  |                   | +145=   | ļ                       | OR                  | +290=               | ļ                      |
|   | (Caliume 1)                                    |   |               |                                       |              |                  |                   | DOIT. FEE                                     |                         | JOR                 | TOTAL<br>ADDIT. FEE | ·                      |
|   |  | (Column 1)<br>CLAIMS                      |               | (Colum                                |              | (Column 3)       | _                 | <del></del>                                   |                         | 7 I                 |                     | T                      |
| AMENDMENT B   |  | REMAINING<br>AFTER<br>AMENDMENT           |               | NUMBE<br>PREVIOU<br>PAID FO           | ISLY         | PRESENT<br>EXTRA |                   | RATE  | ADDI-<br>TIONAL<br>_FEE |                     | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | •   | Minus         | **                                    |              | =                |                   | X\$ 9=  |                         | OR                  | X\$18=              |                        |
| ME  | Inaependent                                    | •   | Minus         | ***                                   |              | =                |                   | X43=  |                         |                     | X86=                |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |               |                                       |              |                  | -                 | 7,10-   |                         | OR                  | 700-                |                        |
|   |  |   |               |                                       |              | .•               |                   | +145=   |                         | OR                  | +290=               |                        |
|   |  |   |               |                                       | , · .        | AD               | TOTAL<br>DIT. FEE |   | OR                      | TOTAL<br>ADDIT. FEE |                     |                        |
| . 1   |  |   |               |                                       |              |                  |                   |   |                         |                     |                     |                        |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |               | HIGHES<br>NUMBE<br>PREVIOU<br>PAID FO | R<br>SLÝ     | PRESENT<br>EXTRA |                   | RATE  | ADDI-<br>TIONAL<br>FEE  |                     | RATE                | ADDI-<br>TIONAL<br>FEE |
| <b>§</b> [  | Total  | *   | Minus         | **                                    |              | =                |                   | X\$ 9=  |                         | OR                  | X\$18=              | <del></del>            |
| I I   | Independent                                    |   | Minus         | ***                                   |              | <b>=</b>         | -                 | X43=  |                         | . •                 | <del></del> -       |                        |
| 1   |  | NTATION OF MU                             | LTIPLE DEP    | ENDENT C                              | LAIM         |                  | . —               | A-0=  |                         | OR                  | X86=                |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.   |  |   |               |                                       |              |                  |                   |   |                         | OR                  | +290=               |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20; enter "20."  ADDIT. FEE  OR ADDIT. FEE  OR ADDIT. FEE |  |   |               |                                       |              |                  |                   |   |                         |                     |                     |                        |
|   | -,   |   |               | SAFAUE IS 18                          | ss tilan     | J. enter J.      | 4d.               | in.the.anni                                   | coriate_box             |                     |                     | •                      |